

University of North Dakota

Fostering Communications

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Building a Network of People in the Foster Care System

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National Research Study Offers "BEST" Practice Recommendations

By Del Hager

"...the PRIDE model of pre-service foster and adoption training developed by the Child Welfare League of America is the most effective training curriculum that will be used in the future..."

The state of Idaho began implementing the PRIDE (Parents Resource for Information, Development and Education) model of practice for foster and adoptive parent training in the spring of 2003. The Idaho Child Welfare Research and Training Center formed a partnership with Eastern Washington University to implement the PRIDE model and seek the opinion of national experts in order to evaluate the recruitment, collaboration, training, support and retention of foster and adoptive families in Idaho.

The goal of this DELPHI research study was to identify strategies for the recruitment, collaboration, training, support and retention of foster and adoptive families that would identify the "BEST" child welfare practice recommendations. Ninety nine findings were listed in the final report including that "...the PRIDE model of pre-service foster and adoption training developed by the Child Welfare League of America is the most effective training curriculum that will be used in the future..."

The following questions were posed to the group of experts from across the United States representing national child welfare center directors, child welfare scholars, national child welfare program managers and child welfare doctoral studies research experts.

1. What are the most effective recruitment strategies to obtain kinship and non-kinship foster and adoptive families for children placed in alternate care who are in the custody of the child welfare system?

- 2. What are the most innovative and effective foster and adoptive family supports delivered by the child welfare system that provides services, supports, and retention of kinship and non-kinship foster and adoptive families?
- **3.** What are the most successful foster and adoptive family pre-service training model(s) or approaches in the child welfare system in American society today?
- 4. What educational content areas should preservice foster and adoptive family training modules or programs focus on to "BEST" prepare foster and adoptive families for the placement of children in their families that have been abused, neglected, and abandoned?
- **5.** Why, or why not. Should kinship foster and adoptive families be required to successfully complete pre-service training and obtain state licensure or certification prior to providing alternate care for a kinship care placement(s)?
- **6.** What are the key areas of outcome measurement to evaluate the efficacy of child welfare outcomes? Do you recommend a particular assessment or evaluation method to measure child welfare practice outcomes?

After their responses were recorded and analyzed, a new survey was sent to the experts that asked them to rate their responses in the context of the future of recruitment, collaboration, training, support and retention of foster and adoptive

continued on page 2

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Continued from page 1

families in the United States. Here is a summary of the research findings.

In the future, the most effective recruitment strategies to obtain kinship and non-kinship foster and adoptive families will be?

The highest recommendations for future recruitment strategies of resource families are:

- 1. Foster parent recruitment
- 2. Church newsletters
- 3. Television
- 4. Pay foster parent recruitment bonuses
- 5. Radio

In the future, the most innovative and effective foster and adoptive family supports delivered by the child welfare system that will provide services, supports, and retention of kinship and nonkinship foster and adoptive families will be?

Highest recommendations for the most innovative and effective foster and adoptive family supports delivered by the child welfare system in the future:

- 1. Inclusion in agency decision making
- 2. Treat foster parents as professionals
- 3. Provide foster parent support groups
- 4. Provide children's mental health services
- 5. Provide foster parent mentoring program

What will be the most successful resource family pre-service training model used in the child welfare system in American Society?

The highest recommendation for pre-service training programs was the PRIDE model. PRIDE received a score that was nearly higher than the other two programs combined.

What educational content areas should future preservice resource family training modules or programs include to "BEST" prepare resource families for the placement of children in their families that have been abused, neglected, and abandoned?

Future educational content areas recommended to be included in pre-service foster and adoptive parent training?

- 1. Role of foster parents
- 2. Working with birth parents
- 3. Community resources available
- 4. Grief and loss
- 5. Cultural competence
- 6. Children's feelings about their birth parents
- 7. Agency child abuse policy and process

Kinship foster and adoptive families should be required to successfully complete pre-service

training and obtain state licensure or certification prior to providing alternate care for kinship care placement(s)?

The experts "strongly agreed" with this recommendation.

In the future, the following key areas of outcome measurement and tools to evaluate the efficacy of child welfare outcomes that should be used by the child welfare system.

- 1. Child and family well-being
- 2. Recurrence of abuse and foster care re-entry
- 3. Receiving needed services by the child welfare system
- 4. Social development
- 5. Child and youth development
- 6. Permanency
- 7. Cultural development

How is North Dakota doing?

In September 2001, North Dakota participated in a federally mandated review of child welfare programs and procedures as they relate to safety, permanence and child and family well-being. Not one single state was in complete compliance with the federal review but North Dakota was in "substantial conformity with more of the federal standards then any other state," according to Paul Ronningen, Children and Family Services Director. Each state was then given an opportunity to submit a Program Improvement Plan that mandated compliance with the national standards. Findings from the Children and Family Services review state plan can be found www.state.nd.us/humanservices. Don Snyder (Foster Care Administrator, Children and Family Services Division, North Dakota Department of Human Services) in his "From the State Office" column on page 2 of this issue of Fostering Communications, tells us that North Dakota has just completed a county by county internal review of child welfare programs.

The timing of the completion of the state review and the timing of the DELPHI research study in the of Idaho couldn't be better. recommendations gleaned from the national experts and reported as "BEST" child welfare practice for the success of recruitment, collaboration, training, support and retention of foster and adoptive families are exactly the kinds of things needed to make our state system one of the best in the country. It's interesting to note that nearly all of the key research recommendations made by the national experts are already in operation in North Dakota. Implementation of the PRIDE model of practice has

Continued from page 2

helped to place the North Dakota foster care and adoption programs in high standing throughout the country.

We need to continue to strive for improvement in many areas but it is comforting to know that a solid foundation is in place. A competency based approach to the mutual selection, training and retention of foster and adoptive families that is the PRIDE model, offers that foundation. Dedicated and high quality staff at local and state levels coupled with an equally dedicated and quality group of foster and adoptive parents form a TEAM of professionals capable of meeting the needs of children and families who enter the North Dakota child welfare system.

A complete copy of the Idaho study can be obtained from Children and Family Services Training Center by calling (701) 777-3442.

From the State Office



By Don Snyder, Administrator

I believe North Dakota has some of the best foster care services in the nation. Dedicated staff and providers throughout the state go far beyond the call of duty to work with children and their families toward reunification when ever possible. We also have a great ability to look at ourselves to see how we can improve.

The Department of Human Services has just finished our first round of Children and Family Services Review (CFSR) across the state. This process has given us a glimpse of some issues that may help us improve services. For example, in regions where there are no foster parent support groups or associations and training, we find very few county foster homes.

With budget shortfalls and fewer resources available to the foster care system, options need to be explored. We may need to refocus our "best practice;" which, in part, is good case management, and discharge planning.

During the review, we found many youth who are not at the appropriate level of care. Some youth who have finished or sufficiently completed their treatment are kept at group homes for 6 months to finish high school. Some youth in group homes could step down to PATH, relative care,

guardianship or family foster care. In order for our system to do this we need more intense case management and much earlier discharge planning.

In six of the cases reviewed, we found that three youth needed to step down to PATH and three to family foster care. Most importantly, this would be in the best interest of the children. From an administrative standpoint, however, we could realize a savings of over \$300,000 for 10 months of care.

I would ask that all of us in the foster care field review the level of care a child is receiving and aggressively look for placements that fit the need of the child. This would include children placed instate or out-of-state.

The time has past when we could place a youth in care and move on to the next case. Most youth who enter foster care do not need the same level of care three to six months down the road. Their treatment needs should be the driving force for discharge or step down into a less restrictive setting. In the near future we will be working with the Regional Supervisors, County Social Services, DJS, foster parents and RCCF/group homes to explore all options available to us.

If any of you have thoughts or ideas on different ways to look at "best practice," please let me know. My email address is: sosnyd@state.nd.us. Or call CFS at 701-328-2316.

In other foster care related news from the Central Office, a committee has been formed to revise the foster parent handbook. The handbook is intended to provide information and useful tools to foster parents who have just completed the family foster home licensing process. It will explain areas such as placing a child into foster care, what to expect once a child has been placed in your home, confidentiality, the teamwork concept, financial information and emergency contacts. The finished product will become part of a Foster Care Orientation packet which will be distributed to foster parents following licensure.

A separate work group has been meeting to incorporate the PRIDE Family Home Assessment Model into the foster care licensing chapter. Most county foster care, PATH and adoption social workers attended the PRIDE Family Home Assessment training in the past year so they are familiar with the tools; but the state policy manual needs revisions to reflect the PRIDE assessment model. An important new teamwork connection is being made between foster care and adoptions as a result of the PRIDE model so our change in philosophy will be noted when the new licensing chapter is created.

Dental Care In Foster Children

By Susan McNair Blatt, MD*

Children who enter foster care may have missed dental visits. Soon after arriving, and annually, foster children should see a dentist. Every effort should be made to teach good care of the teeth, because patterns are set for life.

Toddlers should be given milk or juice only at certain intervals. They should not use a bottle or sippy cup for sleep. Many doctors feel that fruit juice should be diluted with water, because of high sugar content.

Foster parents should know if their water contains fluoride. If not, children should use fluoride supplement daily, prescribed in liquid or pill form. Fluoride prevents dental cavities.

Children should have sealants put on their back teeth around the age of five and then periodically. All dentists do not routinely do this, but it is currently recommended by many authorities. Sealants help prevent cavities.

Children should be supervised, when brushing their teeth. Parents should wipe infants' teeth twice a day with a cloth. Between two and four, parents should brush the child's teeth with a soft brush. After age four, children should brush after each meal. Children should not swallow tooth paste and should use only a pea-sized amount. Older children should be taught to floss daily.

*Dr. Blatt's book, *Guidebook for Raising Foster Children* is available at barnesandnoble.com or Greenwood Publishing, 88 Post Rd. West, PO Box 5007, Westport, CT 06881-5007. Dr. Blatt emails a monthly article to Fostering Communications for publication in the newsletter. Her email address is smblatt@adelphia.net.

Back To Sleep For Babies

By Susan McNair Blatt, MD*

The Back to Sleep Campaign encouraged caregivers to put babies to sleep on their backs, until seven months old. Since the campaign began in 1992, the incidence of Sudden Infant Death Syndrome (SIDS) has declined dramatically.

SIDS most often occurs in the first year of life, especially in the first few months. It is more common in premature babies, Native American babies, and African American babies. The cause is not known.

Babies are safer on their backs. There is little risk of choking or other ill effects. Newer cribs and firm mattresses should be used. Blankets and toys should not be near children's faces. Babies should not co-sleep with adults. No one should smoke in the home.

Foster parents may have made this change, but others may not have. Everyone including grandparents, day care providers, babysitters, and other caregivers should be instructed to put babies on their backs. It is particularly important to instruct biological parents, since they may also care for their children

Sudden infant death is always a terrible tragedy, and it especially terrible if it occurs in a foster home. Although the problem cannot be entirely avoided, the chance of such an episode occurring can be reduced.

National Foster Parent Association

34th National Education Conference

May 10-14, 2004

Adam's Mark Hotel - Orlando, Florida

For more information: phone, 800-557-5238; email to, events@NFPAinc.org or go to their web site at, www.nfpainc.org.

Nominations for Teen Conference Sought

Children and Family Services Training Center (CFSTC) at the University of North Dakota will host the 17th annual Foster Teen Conference June 14-18, 2004. Foster parents and group care staff are encouraged to contact the custodial agency for any youth age 16-18 in order to submit a nomination for the youth in care. Be sure to keep the Teen Conference in mind at Permanence Planning meetings. The conference is a great opportunity for youth to link up with others who share similar past experiences and wish to move forward towards a successful independent adulthood.

The conference is geared toward the development of independent life skills but it is unlike classroom style independent living training programs youth might receive in their home area. At the Teen Conference they will be exposed to a variety of unique experiences. Here is a sample: the chance to explore life on a college campus; cultural awareness and understanding is strongly emphasized; entertainment and recreation are offered; art and drama are used to help look at significant personal issues; and, communication through respect and trust is a value emphasized through all activities.

CFSTC will provide transportation to and from major locations in the state depending upon referral locations. Destination points are usually Bismarck, Minot and Fargo so we can arrange to pick up and drop off youth along highways 2, 83, I-94 and I-29.

The cost of the conference is underwritten by a grant from the Children and Family Services Division, ND DHS. Don Snyder, Foster Care Administrator, has provided generous support for the conference since its inception. Youth do not have to pay a dime to attend! In fact, we even provide \$20 for each person so they have a little spending money. We also give everyone a nice quality travel bag for their future trips.

One unfortunate problem we face is that sometimes we are not able to accept every applicant. A wide variety of personal issues and behaviors are acceptable but some youth are just not ready for this type of experience. Violence, inappropriate sexual behavior and the use of drugs or alcohol are unacceptable behaviors that have to be under control in order for a youth to be considered for the Teen Conference. They also have to be ready to accept a certain degree of independence and

demonstrate a strong commitment to trust. They have to be willing to respect one another and respect the new environment in which they will be living. And, they have to be willing to explore new ideas and concepts, "take a risk" and choose to participate in a somewhat new experience.

Applications will be mailed to referral agencies very soon. If you know someone who could benefit from this unique experience, please complete an application and send it to CFSTC or call with questions as soon as possible. For more information contact Del Hager at 777-3442 or email to del.hager@mail.und.nodak.edu.

Generations United

Astrong foster family support network is a key element in retaining valuable families in the foster care system. There are many benefits to belonging to a formal foster care support group and for constantly being aware of the many informal supports around us. In many instances, foster families are actually relatives of the children in their care. According to the 2000 census, approximately 6 million children are living with grandparents or other relatives. Extended families providing "kinship care" are fast becoming a large part of the foster care system and certainly need a strong support network themselves.

An organization called Generations United, through a federal grant, has established a national network of support groups for families caring for relatives called KinNET. Their website states: "By providing caregiver support groups, technical assistance, and education on the permanency, safety, and well-being goals of the Adoption and Safe Families Act (ASFA), KinNET is fostering a safer, more stable, and consistent living environment for children and families across the United States."

For more information on Generations United and KinNET, please visit their website at: www.gu.org.

President's Corner

No article this time. We hope to have an article from the new NDFPA president in the next issue.



PRIDE TRAINING SCHEDULE

Will complete a combined training in January.

Region II Tentative for March and April

Region III February 7, 21 & March 6
Region IV February 14, 28 & March 13

April 3, 17 & May 1

Region V February 7, 21 & 28

Region I & VIII

April 16, 17 & May 1 April 23, 24 & May 8 September 10, 11 & 25

October 2, 9 & 25

Region VI March 6, 13 & 20

Region VII January 16, 17, 30 & 31

March 19, 20 & April 2, 3

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6

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